Section	Current Language in Existing Contract	New/Amended Language in New Contract	Reason for Change
Exhibit A, Article I.B	B. Cal MediConnect (formerly the Dual Eligible Demonstration Project) means a demonstration program that coordinates health care services for people with Medicare and Medi-Cal through an integrated system of health care delivery, including medical, behavioral, and long-term support. Cal MediConnect is authorized by Section 1115A of the Social Security Act (added by Section 3021 of the Patient Protection and Affordable Care Act, PL 111-148), and it is a key element of California's Coordinated Care Initiative (CCI). The CCI was authorized pursuant to SB 1008 (Chapter 33, Statutes of 2012) and SB 1036 (Chapter 45, Statutes of 2012).	B. Cal MediConnect (formerly the Dual Eligible Demonstration Project) means a demonstration program that coordinates health care services for people with Medicare and Medi-Cal through an integrated system of health care delivery, including medical, behavioral, and long-term support. Cal MediConnect is authorized by Section 1115A of the Social Security Act (added by Section 3021 of the Patient Protection and Affordable Care Act, PL 111-148), and it is a key element of California's Coordinated Care Initiative (CCI). The CCI was authorized pursuant to SB 1008 (Chapter 33, Statutes of 2012) and SB 1036 (Chapter 45, Statutes of 2012), and reauthorized in the 2017-18 California Budget.	Added language for CCI reauthorization.
Exhibit A, Article I.D	D. Dual Eligible Beneficiaries mean individuals who qualify for both public health insurance programs, Medicare and Medi-Cal.	D. Dual Eligible Beneficiaries mean individuals 21 years of age or older who are enrolled for benefits under Medicare Part A (42 U.S.C. Sec. 1395c et seq.) or Medicare Part B (42 U.S.C. Sec. 1395j et seq.), or both, and is eligible for medical assistance under the Medi-Cal State Plan.	Further define Dual Eligible to include Medicare Part A or Medicare Part B. This definition is found in the HHS Trailer Bill Language, Page 39  http://dof.ca.gov/Bud

Section	Current Language in Existing Contract	New/Amended Language in New Contract	Reason for Change
			get/Trailer Bill Lang uage/documents/615 Revised- ContinuationofCMCM andatoryEnrollmentof DualstoManagedCar eandIntegrationofspe cified.pdf
Exhibit A, Article I.F	F. Enhanced Outreach means outreach activities above and beyond routine activities planned in response to other funding (e.g., the first Financial Alignment Contract (FA-1316) and State Health Insurance Assistance Program (SHIP) Funds), tailored to the specific needs of dual eligible beneficiaries eligible for, enrolled in, or targeted for enrollment into a Cal MediConnect Health Plan.	F. Enhanced Outreach means outreach activities above and beyond routine activities planned in response to other funding (e.g., FA-1718, State Health Insurance Assistance Program (SHIP) Funds, and Medicare Improvements for Patients and Providers Act (MIPPA) Funds), tailored to the specific needs of dual eligible beneficiaries eligible for, enrolled in, or targeted for enrollment into a Cal MediConnect Health Plan.	Added language to include FA-1516 contract and MIPPA funds.
Exhibit A, Article I.G	G. Enrollment Brokers mean third-party entities that enroll beneficiaries into Cal MediConnect plans chosen by the beneficiary or, in some cases, passively enroll beneficiaries who do not make a choice.	G. Enrollment Brokers mean third- party entities that enroll beneficiaries into Cal MediConnect plans chosen by the beneficiary.	Removed language specific to passive enrollment.
Exhibit A, Article I.I	I. Health Insurance Counseling and Advocacy Program (HICAP) is a program designed to provide Medicare beneficiaries and those imminent of	I. Health Insurance Counseling and Advocacy Program (HICAP) means a program designed to provide Medicare beneficiaries and those	Change aligns the HICAP definition to the HICAP contract

Section	Current Language in Existing Contract	New/Amended Language in New Contract	Reason for Change
	becoming eligible for Medicare with counseling and advocacy as to Medicare, private health insurance, and related health care coverage plans, on a Statewide basis. [Welf. & Inst. Code §9541]	imminent of becoming eligible for Medicare with counseling and advocacy about Medicare, private health insurance, and related health care coverage plans for the purpose of preserving service integrity on a Statewide basis. [Welf. & Inst. Code § 9541]	
Exhibit A, Article I.K	(New Language) (alters numbering system)	K. Long Term Services and Supports (LTSS) are Medi-Cal programs that provide assistance with Activities of Daily Living, and include a range of home and community based services, such as: In-Home Supportive Services; Community-Based Adult Services; and Multipurpose Senior Services Program, in addition to care in nursing facility services when needed.	Added LTSS definition.
Exhibit A, Article I.L – Q			All subsequent sections in Exhibit A, Article I renumbered due to insert of new section K.

Section	Current Language in Existing Contract	New/Amended Language in New Contract	Reason for Change
Exhibit A, Article II.A.2	All contract and subcontract activities must be separate, distinct, over and above those related activities provided through other funding sources (e.g., the FA-1316 and State Health Insurance Assistance Program (SHIP) Funds) and must meet CDA and CMS performance requirements.	All contract and subcontract activities must be separate, distinct, over and above those related activities provided through other funding sources (e.g., the FA-1718, State Health Insurance Assistance Program (SHIP), and Medicare Improvements for Patients and Providers Act (MIPPA) Funds) and must meet CDA and CMS performance requirements.	Updated language to include FA-1516 and MIPPA Funds.
Exhibit A, Article II.A.3	Contractor must expend all funds by June 30, 2017	Contractor must expend all funds by April 30, 2018.	Updated contract end date.
Exhibit A, Article II.B.5	5. Ensure that the services provided are separate, distinct, above and beyond those performed under the FA-1316 Contract. These services may include, but are not limited to:	5. Ensure that the services provided are separate, distinct, above and beyond those performed under the FA-1718 Contract. These services may include, but are not limited to:	Updated contract name for non-duplication of services.
Exhibit A, Article II.B.5.b	b. providing outreach and community education services to Cal MediConnect-eligible beneficiaries and sub-populations that may not have been reached with the funding from the FA-1316 Contract;	b. Providing outreach and community education services to Cal MediConnect-eligible beneficiaries and sub-populations that may not have been reached with the funding from the FA-1315 and FA-1516 Contracts;	Updated contract reference.

Section	Current Language in Existing Contract	New/Amended Language in New Contract	Reason for Change
Exhibit A, Article II.B.5.d	d. providing options counseling to beneficiaries eligible for Cal MediConnect who were not reached with the funding from FA-1316 Contract;	d. providing options counseling to beneficiaries eligible for Cal MediConnect who were not reached with the funding from FA-1316 and FA-1516 Contracts;	Updated contract reference.
Exhibit A, Article II.B.6	6. Provide to CDA, prior to release of funds, a detailed FA-1516 Work Plan outlining performance goals, measurable outcomes, major objectives, key tasks, and time frames (start and end dates). Work plans must also ensure coordination with the State's enrollment brokers and vendor(s), Work Plan shall include use of CCI Project appeals mechanisms including, but are not limited to referrals to the Cal MediConnect Ombudsman Program. The approved FA-1516 Work Plan is hereby incorporated by reference as part of this Exhibit.	6. Provide to CDA, prior to release of funds, a detailed F2-1718 Work Plan outlining performance goals, measurable outcomes, major objectives, key tasks, and time frames (start and end dates). Work plans must also ensure coordination with the State's enrollment brokers and vendor(s), Work Plan shall include use of CCI Project appeals mechanisms including, but are not limited to referrals to the Cal MediConnect Ombudsman Program. The approved F2-1718 Work Plan is hereby incorporated by reference as part of this Agreement.	Updated contract reference.
Exhibit A, Article II.B.9	9. Prepare and submit the FA-1516 Budget to the CDA Fiscal Team for approval, prior to release of funds. The approved Budget is hereby incorporated by reference as part of this Exhibit.	9. Prepare and submit the F2-1718 Budget to the CDA Fiscal Team for approval, prior to release of funds. The approved Budget is hereby incorporated by reference as part of this Agreement.	Updated contract reference.
Exhibit A, Article II.B.10	10. Prepare and submit mid-term, annual and final FA-1516 narrative reports as specified by CDA in Exhibit	10. Prepare and submit mid-term, annual and final F2-1718 narrative reports as specified by CDA in	Updated contract reference.

Section	Current Language in Existing Contract	New/Amended Language in New Contract	Reason for Change
	E, Article II of this contract.	Exhibit E, Article III of this contract.	
Exhibit A, Article II.B.11	11. Prepare and submit the FA-1516 Budget Narrative as instructed by CDA.	11. Prepare and submit the F2-1718 Budget Narrative as instructed by CDA.	Updated contract reference.
Exhibit B, Articles I & II			Please see SOC for HICAP 1718 Contract for Articles I & II changes
Exhibit B, Article III. A.	A. The Contractor shall prepare and submit by the 30th of each month to the CDA Fiscal Team, in electronic format, using the calendar provided, unless otherwise specified by CDA.  Monthly Contract Fiscal Reporting Due Dates RFF	A. The Contractor shall prepare and submit a monthly expenditure report in an electronic format as instructed by CDA by the 30 <sup>th</sup> of each month.	CDA is removing to calendar on the next page and providing narrative explanation of payments and expenditure reporting.
	Month July Aug Sept Oct Nov Dec Jan Feb Mar Apr May June  RFF Due Date 6/15 7/15 8/15 9/15 10/15 11/15 12/15 1/15 2/15 3/15 4/15 5/15  Expenditure Report Month May June July Aug Sept Oct		
	Nov Dec Jan Feb Mar Apr		

Section	Current Language in Existing Contract	New/Amended Language in New Contract	Reason for Change
	Expenditure Report Due  Date 6/15 7/15 8/15 9/15  10/15 11/15 12/15 1/15 2/15  3/15 4/15 5/15  The table is a standard RFF and expenditure reporting schedule. If the effective date of this Contract is not July 1 <sup>st</sup> , the Contractor's RFF and expenditure reporting will commence		
	with the first month of the term of this Contract period and end with the month proceeding the last full month of the contract.		
Exhibit B, Article III. B	B. During the Contract Period, CDA shall advance funds based on an analysis of current cash needs.	B. Payments will be made to reimburse expenditures reported unless payment method was established as a Request for Funds basis for the contract term at the time of contract execution.	providing narrative explanation of payments and expenditure reporting.
Exhibit B, Article III. C	No current language	C. During the Contract period, requests to expedite payments shall be reviewed and based on an analysis of the Contractor's need to provide services.	Added language about expedited payments
Exhibit B, Article IV. D	No current language	D. Final expenditures must be reported to CDA in accordance with the budget display in Exhibit B. If the expenditures reported by the Contractor exceed the advanced amount, CDA will	Create an understanding of when invoices are due to CDA

Section	Current Language in Existing Contract	New/Amended Language in New Contract	Reason for Change
		reimburse the difference to the Contractor up to the contract amount. If the expenditures reported by the Contractor are less than the advanced amount, CDA will invoice the Contractor for the unspent funds.  The payment on the invoice is due immediately upon receipt or no later than 30 days from the date on the invoice.	
Exhibit D			Please see SOC for AP 1718 Amendment 1 Contract for Exhibit D changes
Exhibit E, Article I.A.1	Services are provided to the Eligible Service Population as defined in Exhibit A, Article I, E of this contract.	Services are provided to the Eligible Service Population as defined in Exhibit A, Article I, F of this contract.	Revised language to reflect Exhibit A change for Eligible Service Population definition.
Exhibit E, Article I.B.3	The Contractor shall take all reasonable and necessary measures to assure that advisors, employees, and volunteers associated with Project operation agree to act in a manner that prevents the appearance of impropriety, or any other act which	The Contractor shall take all reasonable and necessary measures to assure that advisors, employees, and volunteers associated with Project operation agree to act in a manner so as to prevent the appearance of impropriety, or any	Revised language to align with HICAP contract Exhibit E, Article I.B.3

Section	Current Language in Existing Contract	New/Amended Language in New Contract	Reason for Change
	would place in jeopardy HICAP's reputation as an independent and impartial program. The Contractor shall ensure that advisors and governing board members shall be recused from the affairs of the Project in cases of existing employment or compensation from the health insurance or managed health care industries.	other act which would place in jeopardy HICAP's reputation as an independent and impartial program. The Contractor shall ensure that advisors and governing board members shall recuse themselves from the affairs of the Project if they are employed by, or receive compensation from, the health insurance or managed health care industries. This shall not preclude the Contractor from soliciting program contributions from entities that do not pose a conflict of interest.	
Exhibit E, Article I.C	This Agreement is subject to the requirements of Grant No. 1N1CMS331417-01-00 (Affordable Care Act State Health Insurance Assistance Program (SHIP) and ADRC Options Counseling for Medicare-Medicaid Individuals in States with Approved Financial Alignment Models) (http://aging.ca.gov/PM/Docs/AssuranceSpecificToTheFA-1516Contract.pdf).	This Agreement is subject to the requirements of Grant No. 1N1CMS331417-01-00 (Affordable Care Act State Health Insurance Assistance Program (SHIP) and ADRC Options Counseling for Medicare-Medicaid Individuals in States with Approved Financial Alignment Models)	Link citation no longer necessary.
	By receiving funds under this Agreement, the Contractor agrees that it will carry out the project/program as authorized and will comply with the terms and conditions and other	By receiving funds under this Agreement, the Contractor agrees that it will carry out the project/program as authorized and will comply with the terms and	

Section	Current Language in Existing Contract				New/Amended Language in New Contract			Reason for Change	
Exhibit E,	requirements of this Agreement, including but not limited to:			this limit	Agreemered to:	d other required other required other required on the control of t	t not		
Article II.B.2	Mid-Term Progress Reports: A narrative mid-term progress report is due halfway through each Project year.		is re	<b>Final Narrative Report</b> : A final report is required covering the period of performance for F2-1718 Project period.		od of	Updated Reporting Dates to align with NOA.		
		Mid- Term Report	Reporting Period	<del>Due</del> <del>Date</del>		FA-2 Reporting Due Final Period Date			
		Project Year 2015- 16	<del>05/08 –</del> <del>11/07</del>	11/20		Project Year 2017-	12/01/2017 - 04/30/2018	06/01/2018	
		Project Year 2016- 17	<del>05/08</del> — <del>11/07</del>	11/20		18			
Exhibit E, Article II.B.3	end mon	progress of the first	ports: A narrate report covering period is du tand second F	<del>g a 12-</del> e after the					DELETE ITEM  Updated Reporting Dates to align with NOA.
		Year- End Repor	Reporting Period	Due Date					140/1.

Section	Current Language in Existing Contract		New/Amended Language in New Contract	Reason for Change
	Project 05/08 – 05/07 2015-16 Project 05/08 – 05/07 2016-17	07/07		
Exhibit E, Article II.B.4	Final Report: A final report at the end of the Contract			DELETE ITEM
	Final Reporting Period Project Vears 2015-17  Project 05/08/15 06/30/17	Due Date 08/30/ 17		Updated Reporting Dates to align with NOA.
Exhibit E, Article III.B	Transition Plan  1. The Contractor shall submit a transition plan to CDA within fifteen (15) days of CDA's written Notice of Termination or Contractor's Notice of Intent to Terminate.  2. The transition plan must be approved by CDA and shall at a minimum include the following:		The Contractor shall submit a transition plan to CDA within fifteen (15) days of CDA's written Notice of Termination or Contractor's Notice of Intent to Terminate. The transition plan must be approved by CDA and shall at a minimum include the following:	Combined former B.1 and B.2 to reflect article organization in HICAP Contract HI- 1718

Section	Current Language in Existing Contract	New/Amended Language in New Contract	Reason for Change
Exhibit E, Article III.B.1	a. A description of how open or active counseling and legal cases (if applicable) shall be transitioned to the new Contractor.	1. A description of how open or active counseling and legal cases (if applicable) shall be transitioned to the new Contractor.	Reorganized Section structure to reflect HICAP Contract HI- 1718.
Exhibit E, Article III.B.2	b.—A description of how names, addresses, and telephone numbers of current clients will be handled and transferred to the new Contractor.	2. A description of how names, addresses, and telephone numbers of current clients will be handled and transferred to the new Contractor.	Reorganized Section structure to reflect HICAP Contract HI- 1718.
Exhibit E, Article III.B.3	e. A description of how clients will be notified about the change in, and continuation of, their HICAP services.	notified about the change in, and structure	
Exhibit E, Article III.B.4	d.—A description of how communications with other HICAP sites, local agencies and advocacy organizations shall be made to assist in locating alternative services as needed.	4. A description of how communications with other HICAP sites, local agencies and advocacy organizations shall be made to assist in locating alternative services as needed.	Reorganized Section structure to reflect HICAP Contract HI- 1718.
Exhibit E, Article III.B.5	e. A description of how community referral sources will be informed of the pending termination of this HICAP contract or subcontract and the transition and provision of services.	5. A description of how community referral sources will be informed of the pending termination of this HICAP contract or subcontract and the transition and provision of services.	Reorganized Section structure to reflect HICAP Contract HI- 1718.
Exhibit E, Article III.B.6	f.—A description of how sensitive and confidential records will be transferred.	6. A description of how sensitive and confidential records will be transferred.	Reorganized Section structure to reflect HICAP Contract HI- 1718.

Section	Current Language in Existing Contract	New/Amended Language in New Contract	Reason for Change
Exhibit E, Article III.B.7	g.—A description of how staff adequate to providing continued service through the term of the existing contract will be maintained. [22 CCR 7206(e)(4)]	7. A description of adequate staff to provide continued service through the term of the existing Contract. [22 CCR 7206(e)(4)]	Reorganized Section structure to reflect HICAP Contract HI- 1718.
Exhibit E, Article III.B.8	h.—A plan to complete a property inventory and transfer, or return to CDA all equipment purchased with FA-1516 Contract funds as directed by CDA.	8. A plan to complete a property inventory and transfer, or return to CDA all equipment purchased with F2-1718 Contract funds as directed by CDA.	Reorganized Section structure to reflect HICAP Contract HI- 1718. Updated FA contract number.
Exhibit E, Article III.B.9	i. Additional information as necessary to effect a safe transition of clients from the outgoing Contractor or Subcontractor to the new Contractor or Subcontractor.	9. Additional information as necessary to effect a safe transition of clients from the outgoing Contractor or Subcontractor to the new Contractor or Subcontractor.	Reorganized Section structure to reflect HICAP Contract HI- 1718.
Exhibit E, Article III.F.5	New Language	Providing goods or services not allocable to the approved project.	Additional language specific to Notice of Award.
Exhibit E, Article III.F.6	New Language	• Covering capital expenditures for improvements to land, buildings, or equipment which materially increase their value or useful life as a direct cost except with the prior written approval of the Federal awarding agency.	Additional language specific to Notice of Award.